


INVITATION TO BID STATE OF LOUISIANA DIVISION OF ADMINISTRATION OFFICE OF STATE PURCHASING		BIDS WILL BE PUBLICLY OPENED: <div style="font-size: 1.2em; font-weight: bold;">NOV 02, 2005 10:00 AM</div> PURCHASING AGENCY NO. : 107001 SEE NO. 8 BELOW. RETURN BID TO <div style="display: flex; justify-content: space-between;"> 2203613 11/02/05 10:00 AM </div> <div style="display: flex; justify-content: space-between;"> M41958Z </div> OFFICE OF STATE PURCHASING OFFICE OF STATE PURCHASING POST OFFICE BOX 94095 BATON ROUGE, LA 70804-9095 <div style="display: flex;"> <div style="flex: 1;"> BUYER : ANN CAMPBELL BUYER PHONE : (225) 342-8043 DATE ISSUED : 10/12/05 REQ. AGENCY : 511080 WILDLIFE & FISHERIES AGENCY REQ. NO. : 511M008 ISIS REQ. NO. : 1282117 VENDOR PHONE : FISCAL YEAR : 06 CLASS/SUBCLASS : 96636 SCHEDULED BEGIN DATE : 00/00/00 SCHEDULED END DATE : 00/00/00 T-NUMBER : </div> <div style="flex: 0.5; text-align: right; font-size: 0.8em;"> FOLD HERE--> </div> </div>
<div style="border: 1px solid black; padding: 5px;"> =====> VENDOR NO. : SOLICITATION : 2203613 FILE NO. : M41958Z OPENING DATE : 11/02/05 </div> <div style="border: 1px solid black; padding: 5px; min-height: 80px;"> =====> VENDOR NAME AND ADDRESS </div> <div style="text-align: center; font-weight: bold; font-size: 1.1em;"> FILL IN VENDOR NUMBER (FEIN), NAME AND ADDRESS ABOVE, BEFORE SUBMITTING BID. </div>		

*SHELLFISH AND OYSTER TRIP TICKET
FORMS PER THE FOLLOWING SPECIFICATIONS*

- TO BE COMPLETED BY VENDOR
1. _____ PLEASE REMOVE FROM THIS COMMODITY CODE.
 2. _____ DELIVERY WILL BE MADE IN THIS NUMBER OF DAYS AFTER RECEIPT OF ORDER.
 3. _____ % CASH DISCOUNT FOR PROMPT PAYMENT IF MADE WITHIN THIRTY (30) DAYS. CASH DISCOUNTS FOR LESS THAN 30 DAYS OR LESS THAN 1% WILL BE ACCEPTED, BUT WILL NOT BE CONSIDERED IN DETERMINING AWARDS. ON INDEFINITE QUANTITY TERM CONTRACTS, CASH DISCOUNTS WILL BE ACCEPTED AND TAKEN BUT WILL NOT BE CONSIDERED IN DETERMINING AWARDS.
 4. _____ BID BOND ATTACHED, _____ CERTIFIED CHECK ATTACHED, _____ OTHER, IF REQUIRED.
 5. _____ BID REFERENCE NUMBER. (THIS NUMBER WILL APPEAR ON RESULTING ORDER OR CONTRACT).

- INSTRUCTIONS TO BIDDERS
1. READ THE ENTIRE BID, INCLUDING ALL TERMS AND CONDITIONS AND SPECIFICATIONS.
 2. ALL BID PRICES MUST BE TYPED OR WRITTEN IN INK. ANY CORRECTIONS, ERASURES OR OTHER FORMS OF ALTERATION TO UNIT PRICES SHOULD BE INITIALED BY THE BIDDER.
 3. THIS BID IS TO BE MANUALLY SIGNED IN INK.
 4. BID PRICES SHALL INCLUDE DELIVERY OF ALL ITEMS F.O.B. DESTINATION OR AS OTHERWISE PROVIDED. BIDS CONTAINING "PAYMENT IN ADVANCE" OR "C.O.D." REQUIREMENTS MAY BE REJECTED. PAYMENT IS TO BE MADE WITHIN 30 DAYS AFTER RECEIPT OF PROPERLY EXECUTED INVOICE OR DELIVERY, WHICHEVER IS LATER.
 5. AMOUNT OF BID BOND REQUIRED: _____ N/A _____.
 6. AMOUNT OF PERFORMANCE BOND, IF REQUIRED, _____ OR _____ 0% _____ OF BID.
 7. DESIRED DELIVERY: _____ 002WEEKS ARO _____.
 8. TO ASSURE CONSIDERATION OF YOUR BID, ALL BIDS AND ADDENDA SHOULD BE RETURNED IN AN ENVELOPE OR PACKAGE CLEARLY MARKED WITH THE BID OPENING DATE AND THE BID NUMBER, OR SUBMITTED IN THE SPECIAL ENVELOPE IF FURNISHED FOR THAT PURPOSE.
 9. BIDS SUBMITTED ARE SUBJECT TO PROVISIONS OF THE LAWS OF THE STATE OF LOUISIANA INCLUDING BUT NOT LIMITED TO L.R.S. 39:1551-1736; PURCHASING RULES AND REGULATIONS; EXECUTIVE ORDERS; STANDARD TERMS AND CONDITIONS; SPECIAL CONDITIONS; AND SPECIFICATIONS LISTED IN THIS SOLICITATION.
 10. IMPORTANT: BY SIGNING THE BID, THE BIDDER CERTIFIES COMPLIANCE WITH ALL INSTRUCTIONS TO BIDDERS, TERMS, CONDITIONS AND SPECIFICATIONS, AND FURTHER CERTIFIES THAT THIS BID IS MADE WITHOUT COLLUSION OR FRAUD. THIS BID IS TO BE MANUALLY SIGNED IN INK BY A PERSON AUTHORIZED TO BIND THE VENDOR (SEE NO.30). ALL BID INFORMATION SHALL BE MADE WITH INK OR TYPEWRITTEN.

VENDOR PHONE NUMBER: FAX NUMBER:	TITLE	DATE
SIGNATURE OF AUTHORIZED BIDDER - SEE NO. 30, PAGE 3. (MUST BE SIGNED)		NAME OF BIDDER (TYPED OR PRINTED)

STANDARD TERMS & CONDITIONS	INVITATION TO BID	
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11 ADDRESS ALL INQUIRIES AND CORRESPONDENCE TO THE BUYER AT THE PHONE AND ADDRESS SHOWN ABOVE.

12. CONFERENCE:
 NA
 NA
 NA

13. BID FORMS.
 ALL WRITTEN BIDS, UNLESS OTHERWISE PROVIDED FOR, MUST BE SUBMITTED ON, AND IN ACCORDANCE WITH, FORMS PROVIDED, PROPERLY SIGNED (SEE NO. 30). BIDS SUBMITTED IN THE FOLLOWING MANNER WILL NOT BE ACCEPTED:
 A. BID CONTAINS NO SIGNATURE INDICATING INTENT TO BE BOUND;
 B. BID FILLED OUT IN PENCIL; AND
 C. BID NOT SUBMITTED ON THE STATE'S STANDARD FORMS.

BIDS MUST BE RECEIVED AT THE ADDRESS SPECIFIED IN THE SOLICITATION PRIOR TO BID OPENING TIME IN ORDER TO BE CONSIDERED. TELEGRAPHIC AND FAX ALTERATIONS TO BIDS RECEIVED BEFORE BID OPENING TIME WILL BE CONSIDERED PROVIDED FORMAL BID AND WRITTEN ALTERATION HAVE BEEN RECEIVED AND TIME-STAMPED BEFORE BID OPENING TIME. ENTIRE BID SHOULD BE RETURNED, EXCEPT ITEM PAGES NOT BID.

14. STANDARDS OF QUALITY.
 ANY PRODUCT OR SERVICE BID SHALL CONFORM TO ALL APPLICABLE FEDERAL AND STATE LAWS AND REGULATIONS AND THE SPECIFICATIONS CONTAINED IN THE SOLICITATION. UNLESS OTHERWISE SPECIFIED IN THE SOLICITATION, ANY MANUFACTURER'S NAME, TRADE NAME, BRAND NAME, OR CATALOG NUMBER USED IN THE SPECIFICATION IS FOR THE PURPOSE OF DESCRIBING THE STANDARD OF QUALITY, PERFORMANCE, AND CHARACTERISTICS DESIRED AND IS NOT INTENDED TO LIMIT OR RESTRICT COMPETITION. BIDDER MUST SPECIFY THE BRAND AND MODEL NUMBER OF THE PRODUCT OFFERED IN HIS BID. BIDS NOT SPECIFYING BRAND AND MODEL NUMBER SHALL BE CONSIDERED AS OFFERING THE EXACT PRODUCTS SPECIFIED IN THE SOLICITATION.

15. DESCRIPTIVE INFORMATION.
 BIDDERS PROPOSING AN EQUIVALENT BRAND OR MODEL SHOULD SUBMIT WITH THE BID INFORMATION (SUCH AS ILLUSTRATIONS, DESCRIPTIVE LITERATURE, TECHNICAL DATA) SUFFICIENT FOR STATE OF LOUISIANA TO EVALUATE QUALITY, SUITABILITY, AND COMPLIANCE WITH THE SPECIFICATIONS IN THE SOLICITATION. FAILURE TO SUBMIT DESCRIPTIVE INFORMATION MAY CAUSE BID TO BE REJECTED. ANY CHANGE MADE TO A MANUFACTURER'S PUBLISHED SPECIFICATIONS SUBMITTED FOR A PRODUCT SHALL BE VERIFIABLE BY THE MANUFACTURER. IF ITEM(S) BID DO NOT FULLY COMPLY WITH SPECIFICATIONS (INCLUDING BRAND AND/OR PRODUCT NUMBER), BIDDER MUST STATE IN WHAT RESPECT ITEM(S) DEVIATE. FAILURE TO NOTE EXCEPTIONS ON THE BID FORM WILL NOT RELIEVE THE SUCCESSFUL BIDDER(S) FROM SUPPLYING THE ACTUAL PRODUCTS REQUESTED.

16. BID OPENING.
 BIDDERS MAY ATTEND THE BID OPENING, BUT NO INFORMATION OR OPINIONS CONCERNING THE ULTIMATE CONTRACT AWARD WILL BE GIVEN AT THE BID OPENING OR DURING THE EVALUATION PROCESS. BIDS MAY BE EXAMINED WITHIN 72 HOURS AFTER BID OPENING. INFORMATION PERTAINING TO COMPLETED FILES MAY BE SECURED BY VISITING THE STATE OF LOUISIANA DURING NORMAL WORKING HOURS. WRITTEN BID TABULATIONS WILL NOT BE FURNISHED.

17. AWARDS.
 THE STATE OF LOUISIANA RESERVES THE RIGHT TO AWARD ITEMS SEPARATELY, GROUPED OR ON AN ALL-OR-NONE BASIS AND TO REJECT ANY OR ALL BIDS AND WAIVE ANY INFORMALITIES.

18. PRICES.
 UNLESS OTHERWISE SPECIFIED BY THE STATE OF LOUISIANA IN THE SOLICITATION, BID PRICES MUST BE COMPLETE, INCLUDING TRANSPORTATION PREPAID BY BIDDER TO DESTINATION AND FIRM FOR ACCEPTANCE FOR A MINIMUM OF 30 DAYS. IF ACCEPTED, PRICES MUST BE FIRM FOR THE CONTRACTUAL PERIOD. BIDS OTHER THAN F.O.B. DESTINATION MAY BE REJECTED. PRICES SHOULD BE QUOTED IN THE UNIT (EACH, BOX, CASE, ETC.) AS SPECIFIED IN THE SOLICITATION.

19. DELIVERIES.
 BIDS MAY BE REJECTED IF THE DELIVERY TIME INDICATED IS LONGER THAN THAT SPECIFIED IN THE SOLICITATION.

20. TAXES.
 VENDOR IS RESPONSIBLE FOR INCLUDING ALL APPLICABLE TAXES IN THE BID PRICE. STATE AGENCIES ARE EXEMPT FROM ALL STATE AND LOCAL SALES AND USE TAXES.

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21. NEW PRODUCTS.
 UNLESS SPECIFICALLY CALLED FOR IN THE SOLICITATION, ALL PRODUCTS FOR PURCHASE MUST BE NEW, NEVER PREVIOUSLY USED, AND THE CURRENT MODEL AND/OR PACKAGING. NO REMANUFACTURED, DEMONSTRATOR, USED OR IRREGULAR PRODUCT WILL BE CONSIDERED FOR PURCHASE UNLESS OTHERWISE SPECIFIED IN THE SOLICITATION. THE MANUFACTURER'S STANDARD WARRANTY WILL APPLY UNLESS OTHERWISE SPECIFIED IN THE SOLICITATION.

22. CONTRACT RENEWALS.
 UPON AGREEMENT OF THE STATE OF LOUISIANA AGENCY AND THE CONTRACTOR, A TERM CONTRACT MAY BE EXTENDED FOR 2 ADDITIONAL 12-MONTH PERIODS AT THE SAME PRICES, TERMS AND CONDITIONS. IN SUCH CASES, THE TOTAL CONTRACT TERM CANNOT EXCEED 36 MONTHS.

23. CONTRACT CANCELLATION.
 THE STATE OF LOUISIANA HAS THE RIGHT TO CANCEL ANY CONTRACT, IN ACCORDANCE WITH PURCHASING RULES AND REGULATIONS, FOR CAUSE, INCLUDING BUT NOT LIMITED TO, THE FOLLOWING: (1) FAILURE TO DELIVER WITHIN THE TIME SPECIFIED IN THE CONTRACT; (2) FAILURE OF THE PRODUCT OR SERVICE TO MEET SPECIFICATIONS, CONFORM TO SAMPLE QUALITY OR TO BE DELIVERED IN GOOD CONDITION; (3) MISREPRESENTATION BY THE CONTRACTOR; (4) FRAUD, COLLUSION, CONSPIRACY OR OTHER UNLAWFUL MEANS OF OBTAINING ANY CONTRACT WITH THE STATE; (5) CONFLICT OF CONTRACT PROVISIONS WITH CONSTITUTIONAL OR STATUTORY PROVISIONS OF STATE OR FEDERAL LAW; (6) ANY OTHER BREACH OF CONTRACT.

24. DEFAULT OF CONTRACTOR.
 FAILURE TO DELIVER WITHIN THE TIME SPECIFIED IN THE BID WILL CONSTITUTE A DEFAULT AND MAY CAUSE CANCELLATION OF THE CONTRACT. WHERE THE STATE HAS DETERMINED THE CONTRACTOR TO BE IN DEFAULT, THE STATE RESERVES THE RIGHT TO PURCHASE ANY OR ALL PRODUCTS OR SERVICES COVERED BY THE CONTRACT ON THE OPEN MARKET AND TO CHARGE THE CONTRACTOR WITH COST IN EXCESS OF THE CONTRACT PRICE. UNTIL SUCH ASSESSED CHARGES HAVE BEEN PAID, NO SUBSEQUENT BID FROM THE DEFAULTING CONTRACTOR WILL BE CONSIDERED.

25. ORDER OF PRIORITY.
 IN THE EVENT THERE IS A CONFLICT BETWEEN THE INSTRUCTIONS TO BIDDERS OR STANDARD CONDITIONS AND THE SPECIAL CONDITIONS, THE SPECIAL CONDITIONS SHALL GOVERN.

26. APPLICABLE LAW.
 ALL CONTRACTS SHALL BE CONSTRUED IN ACCORDANCE WITH AND GOVERNED BY THE LAWS OF THE STATE OF LOUISIANA.

27. COMPLIANCE WITH CIVIL RIGHTS LAWS.
 BY SUBMITTING AND SIGNING THIS BID, BIDDER AGREES TO ABIDE BY THE REQUIREMENTS OF THE FOLLOWING AS APPLICABLE: TITLE VI AND VII OF THE CIVIL RIGHTS ACT OF 1964, AS AMENDED BY THE EQUAL OPPORTUNITY ACT OF 1972, FEDERAL EXECUTIVE ORDER 11246, FEDERAL REHABILITATION ACT OF 1973, AS AMENDED, THE VETERAN'S READJUSTMENT ASSISTANCE ACT OF 1974, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, THE AGE ACT OF 1975, AND BIDDER AGREES TO ABIDE BY THE REQUIREMENTS OF THE AMERICANS WITH DISABILITIES ACT OF 1990. BIDDER AGREES NOT TO DISCRIMINATE IN ITS EMPLOYMENT PRACTICES, AND WILL RENDER SERVICES UNDER ANY CONTRACT ENTERED INTO AS A RESULT OF THIS SOLICITATION WITHOUT REGARD TO RACE, COLOR, RELIGION, SEXUAL ORIENTATION, NATIONAL ORIGIN, VETERAN STATUS, POLITICAL AFFILIATION, OR DISABILITIES. ANY ACT OF DISCRIMINATION COMMITTED BY BIDDER, OR FAILURE TO COMPLY WITH THESE STATUTORY OBLIGATIONS WHEN APPLICABLE, SHALL BE GROUNDS FOR TERMINATION OF ANY CONTRACT ENTERED INTO AS A RESULT OF THIS SOLICITATION.

28. SPECIAL ACCOMMODATION.
 ANY "QUALIFIED INDIVIDUAL WITH A DISABILITY" AS DEFINED BY THE AMERICANS WITH DISABILITIES ACT WHO HAS SUBMITTED A BID AND DESIRES TO ATTEND THE BID OPENING, MUST NOTIFY THIS OFFICE IN WRITING NOT LATER THAN SEVEN DAYS PRIOR TO THE BID OPENING DATE OF THEIR NEED FOR SPECIAL ACCOMMODATIONS. IF THE REQUEST CANNOT BE REASONABLY PROVIDED, THE INDIVIDUAL WILL BE INFORMED PRIOR TO THE BID OPENING.

29. INDEMNITY.
 CONTRACTOR AGREES, UPON RECEIPT OF WRITTEN NOTICE OF A CLAIM OR ACTION, TO DEFEND THE CLAIM OR ACTION, OR TAKE OTHER APPROPRIATE MEASURE, TO INDEMNIFY, AND HOLD HARMLESS, THE STATE, ITS OFFICERS, ITS AGENTS AND ITS EMPLOYEES FROM AND AGAINST ALL CLAIMS AND ACTIONS FOR BODILY INJURY, DEATH OR PROPERTY DAMAGES CAUSED BY THE FAULT OF THE CONTRACTOR, ITS OFFICERS, ITS AGENTS, OR ITS EMPLOYEES. CONTRACTOR IS OBLIGATED TO INDEMNIFY ONLY TO THE EXTENT OF THE FAULT OF THE CONTRACTOR, ITS OFFICERS, ITS AGENTS, OR ITS EMPLOYEES. HOWEVER, THE CONTRACTOR SHALL HAVE NO OBLIGATION AS SET FORTH ABOVE WITH RESPECT TO ANY CLAIM OR ACTION FROM BODILY INJURY, DEATH OR PROPERTY DAMAGES ARISING OUT OF THE FAULT OF THE STATE, ITS OFFICERS, ITS AGENTS OR ITS EMPLOYEES.

30. SIGNATURE AUTHORITY.
 IN ACCORDANCE WITH L.R.S. 39:1594 (ACT 121), THE PERSON SIGNING THE BID MUST BE:

1. A CURRENT CORPORATE OFFICER, PARTNERSHIP MEMBER OR OTHER INDIVIDUAL SPECIFICALLY AUTHORIZED TO SUBMIT A BID AS REFLECTED IN THE APPROPRIATE RECORDS ON FILE WITH THE SECRETARY OF STATE; OR
2. AN INDIVIDUAL AUTHORIZED TO BIND THE VENDOR AS REFLECTED BY A CORPORATE RESOLUTION, CERTIFICATE OR AFFIDAVIT; OR
3. OTHER DOCUMENTS INDICATING AUTHORITY WHICH ARE ACCEPTABLE TO THE PUBLIC ENTITY.

SPECIAL TERMS & CONDITIONS		INVITATION TO BID	
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1 BID DELIVERY INSTRUCTIONS FOR STATE PURCHASING:

BIDDERS ARE HEREBY ADVISED THAT THE U.S. POSTAL SERVICE DOES NOT MAKE DELIVERIES TO OUR PHYSICAL LOCATION.

BIDS MAY BE MAILED THROUGH THE U.S. POSTAL SERVICE TO OUR BOX AT:
 OFFICE OF STATE PURCHASING
 P O BOX 94095
 BATON ROUGE LA 70804-9095

BIDS MAY BE DELIVERED BY HAND OR COURIER SERVICE TO OUR PHYSICAL LOCATION AS FOLLOWS:

OFFICE OF STATE PURCHASING
 CLAIBORNE BUILDING, SUITE 2-160
 1201 NORTH THIRD STREET
 BATON ROUGE, LA 70802

BIDDER IS SOLELY RESPONSIBLE FOR ENSURING THAT ITS COURIER SERVICE PROVIDER MAKES INSIDE DELIVERIES TO OUR PHYSICAL LOCATION. THE OFFICE OF STATE PURCHASING IS NOT RESPONSIBLE FOR ANY DELAYS CAUSED BY THE BIDDER'S CHOSEN MEANS OF BID DELIVERY.

BIDDER IS SOLELY RESPONSIBLE FOR THE TIMELY DELIVERY OF ITS BID. FAILURE TO MEET THE BID OPENING DATE & TIME SHALL RESULT IN REJECTION OF THE BID.

 PUBLICIZING AWARDS. IN ACCORDANCE WITH L.A.C.34:I.535, UNSUCCESSFUL BIDDERS WILL BE NOTIFIED OF THE AWARD PROVIDED THAT THEY SUBMIT WITH THEIR BID A SELF-ADDRESSED STAMPED ENVELOPE REQUESTING THIS INFORMATION.

ATTENTION:

RECEIPT OF A SOLICITATION OR AWARD CANNOT BE RELIED UPON AS AN ASSURANCE OF RECEIVING FUTURE SOLICITATIONS. IN ORDER TO RECEIVE FUTURE SOLICITATIONS/AWARDS FROM THIS OFFICE, YOU MUST ENROLL IN THE PROPER CATEGORY ON LAPAC OR ON STATE PURCHASING'S AGPS BIDDERS LIST. ENROLLMENT IN LAPAC IS FREE AND PROVIDES EMAIL NOTIFICATION OF BID OPPORTUNITIES BASED UPON COMMODITIES THAT YOU SELECT.

- 2 PREFERENCE. IN ACCORDANCE WITH LOUISIANA REVISED STATUTES 39:1595, A PREFERENCE MAY BE ALLOWED FOR PRODUCTS MANUFACTURED, PRODUCED, GROWN, OR ASSEMBLED IN LOUISIANA OF EQUAL QUALITY.

DO YOU CLAIM THIS PREFERENCE? YES _____

SPECIFY LINE NUMBER(S) : _____

 SPECIFY LOCATION WITHIN LOUISIANA WHERE THIS PRODUCT IS MANUFACTURED,

SPECIAL TERMS & CONDITIONS		INVITATION TO BID	
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PRODUCED, GROWN OR ASSEMBLED: _____

(NOTE: IF MORE SPACE IS REQUIRED, INCLUDE ON SEPARATE SHEET.)

DO YOU HAVE A LOUISIANA BUSINESS WORKFORCE? YES _____ NO _____

IF SO, DO YOU CERTIFY THAT AT LEAST FIFTY PERCENT (50%) OF YOUR LOUISIANA BUSINESS WORKFORCE IS COMPRISED OF LOUISIANA RESIDENTS?

YES _____ NO _____

FAILURE TO SPECIFY ABOVE INFORMATION MAY CAUSE ELIMINATION FROM PREFERENCES. PREFERENCES SHALL NOT APPLY TO SERVICE CONTRACTS.

- 3 CANCELLATION
THE STATE OF LOUISIANA RESERVES THE RIGHT TO CANCEL THIS CONTRACT WITH THIRTY (30) DAYS WRITTEN NOTICE.
- 4 THE STATE OF LOUISIANA, WITH THE ACCEPTANCE OF THE CONTRACTOR, RESERVES THE RIGHT TO REPURCHASE THE ABOVE ITEM(S) AT THE SAME PRICE, TERM AND CONDITIONS SHOWN FOR A PERIOD OF ONE (1) YEAR FROM THE DATE OF THE ORIGINAL PURCHASE ORDER.
- 5 AT THE OPTION OF THE STATE OF LOUISIANA AND ACCEPTANCE BY THE CONTRACTOR, THIS CONTRACT MAY BE EXTENDED FOR TWO ADDITIONAL TWELVE (12) MONTH PERIODS AT THE SAME PRICE, TERMS AND CONDITIONS. TOTAL CONTRACT TIME MAY NOT EXCEED THIRTY-SIX (36) MONTHS.
- 6 ALL ART, COLOR SEPARATIONS, FILM, NEGATIVES, TAPES, FLOPPY DISKS, SPECIAL PLATES AND DIES ARE TO BECOME THE PROPERTY OF THE STATE OF LOUISIANA. SUCCESSFUL VENDOR IS TO FORWARD THESE TO THE AGENCY UPON COMPLETION OF THIS JOB.
- 7 QUALITY OF WORKMANSHIP AND STOCK-ALL ARTICLES FURNISHED AND WORK DONE MUST BE OF A FIRST CLASS QUALITY. THE USE OF POOR TYPE, POOR PRESSWORK OR THE USE OF A DIFFERENT COLOR OF INK FROM THAT ORDERED, INFERIOR BINDING, INFERIOR QUALITY OR MIS-MATCHED PAPER STOCK, A LESSER GRADE OF PAPER THAN THAT ORDERED, OR ANY OTHER DISCREPANCIES WILL BE SUFFICIENT CAUSE FOR THE REJECTION OF THE WORK AND FOR REFUSAL OF PAYMENT UNTIL THE CONTRACT CONTROVERSY IS RESOLVED.

PRICE SHEET		INVITATION TO BID			
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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	UNLESS SPECIFIED ELSEWHERE SHIP TO: WILDLIFE & FISHERIES COMPUTER CENTER 2000 QUAIL DRIVE, RM. 136 BATON ROUGE , LA 70808				
00001	COMMODITY CODE: 966-36-000000 SHELLFISH 7 DAY FORM #893-START 562201 + CHECK DIGIT 19410/RED-ORANGE DROPOUT INK PER THE FOLLOWING SPECIFICATIONS. SAMPLE ATTACHED	65	M		
00002	COMMODITY CODE: 966-36-000000 SHELLFISH 1 DAY FORM #794 START #521001 + CHECK DIGIT 6983/RED DROPOUT INK PER THE FOLLOWING SPECIFICATIONS SAMPLE ATTACHED	50	M		
00003	COMMODITY CODE: 966-36-000000 OYSTER TRIP FORM #695 START #144401 + CHECK DIGIT 24944/PINK DROPOUT INK PER THE FOLLOWING SPECIFICATIONS SAMPLE ATTACHED PROOFS REQUIRED FOR PRIOR APPROVAL DELIVER TERMS: 2 WEEKS ARO	25	M		

Department of Wildlife and Fisheries
Solicitation Number: 2203613
File Number: M41958Z
Bid Opening Date: 11/02/2005

Specifications for Commercial Dealer Trip Ticket Forms

Size

8-1/2 X 11-5/8; 3-part snapset, printed portrait, bottom stub, tear-down to 8-1/2 X 11

Stock

Part 1: 26# Carbonless Paper CB-White
Part 2: 15# Carbonless Paper CFB-Pink
Part 3: 15# Carbonless Paper CF-Yellow

Part 1 will be scanned and therefore must have OCR characteristics including reflectance of not less than 70% magnesium oxide, foreign matter not to exceed 10 PPM, capacity not less than 60%, and rag content less than 25%. Paper that is highly oil or grease resistant is unacceptable. Paper should be resistant to curl.

Ink

Form will include both black ink and one dropout colored ink. OCR inks acceptable are Flint Ink Corp. or equal.

Form 893 is 19410/Red-Orange Dropout
Form 794 is 6983/Red Dropout
Form 695 is 24944/Pink Dropout

Documents will be processed on a Kodak 3500 scanner with a red drop out lamp. Inks must be guaranteed to work with this scanning equipment successfully.

Perforations

Perforations on Part 1 (bottom stub) must be clean edge micro-perf for easy tear, leaving a sharp, smooth edge.

Numbering

Forms are to be sequentially numbered with a seven digit number (six plus a Mod 10 check digit). The beginning number for each form is as follows:

Form 893 will be 562201 + check digit
Form 794 will be 521001 + check digit
Form 695 will be 144401 + check digit

Proof

Vendor is to provide color separated camera ready proofs to Wildlife and Fisheries, Attention Stacie James. Proofs are to be provided within 1 week after receipt of purchase order. Agency will return within 3 days.

Packaging

Forms are to be packaged in packs of 250 sets. Each pack is to be labeled with the beginning and ending number of the packaged forms. Each case (container and forms) should not exceed 45 pounds shipping weight.

Post Award Contacts

David Dousay 225-765-2840
Henry Gauthier 225-765-2840
Stacie James 225-763-3588
or fax 225-763-3589

EZEC10
EXAMPLE:

EXEC10 derives the modulus –10 check digit, using the following algorithm:

Assume here that current source data is the numeric value 1734284 (the rightmost 4 is the entered self-checking digit, not part of the base number).

1. Multiply the units position of the base number of source data by 2, and multiply every alternate position, moving right to left, by 2.

1	7	3	4	2	8	4(self-checking digit)
	<u>x2</u>		<u>x2</u>		<u>x2</u>	
	14		8		16	

2. Add the digits of the products to the digits of the base number that were not multiplied by 2:

$$1 + 1 + 4 + 3 + 8 + 2 + 1 + 6 = 26$$

3. Subtract the sum of the next highest number ending in 0 to get the self-checking digit. (If the difference is 10, 0 is used.)

$$\begin{array}{r} 30 \\ -26 \\ \hline 4 \end{array}$$

The resulting digit is compared with the input check digit. The status is set to 0 if the two match, and 1 if they do not match.

893

1234567890 ABCDEFGHIJKLMNOPQRSTUVWXYZ

TICKET NO. 5487004

CONTINUATION
TICKET NO.

VOID
TICKET

VESSEL
NAMECOMMERCIAL FISHERMAN'S
NAME (Please Print)Commercial
Fisherman's
License Number

C

Coast Guard Documented
Vessel Number

OR
State Vessel Registration
Number

Area Fished

Gear Used

SEAFOOD DEALER'S NAME
(Please Print)

Dealer's
License Number

C

YEAR

MONTH

DAY	TRIP TIME	SHELLFISH CODE	QUANTITY	UNIT	COND	COUNT OR MARKET	PRICE/UNIT	VALUE	FISHERMAN'S INITIALS	VOID
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Form 893
Reduced 10%

Form 893
Reduced 10%

ITEM	DEALER DEDUCTIONS	COST

TOTAL PURCHASES

TOTAL DEDUCTIONS

TOTAL PAID

I CERTIFY THAT THIS INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

FISHERMAN'S SIGNATURE

DEALER'S SIGNATURE _____

NOTE: ALL INFORMATION REQUIRED BY LAW MUST BE COMPLETED FOR EACH TRIP. I UNDERSTAND THAT PROVIDING FALSE INFORMATION MAY RESULT IN CRIMINAL CONSEQUENCES.

NOTE: THIS FORM MAY BE USED FOR TRANSACTIONS FOR NO MORE THAN 7 CONSECUTIVE DAYS.


893

1 2 3 4 5 6 7 8 9 0 A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

DEALER COPY

TICKET NO. **5487004**

CONTINUATION
TICKET NO.

VOID 

VESSEL
NAME

**COMMERCIAL FISHERMAN'S
NAME (Please Print)**

Coast Guard Documented
Vessel Number

OR
State Vessel Registration
Number

Commercial
Fisherman's
License Number**Area Fished**

Gear Used

SEAFOOD DEALER'S NAME
(Please Print)

**Dealer's
License Number**

YEAR

MONTH

[illegible]

ITEM	DEALER DEDUCTIONS	COST

TOTAL PURCHASES**TOTAL DEDUCTIONS**

TOTAL PAID

I CERTIFY THAT THIS INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

FISHERMAN'S SIGNATURE

DEALER'S SIGNATURE _____

NOTE: ALL INFORMATION REQUIRED BY LAW MUST BE COMPLETED FOR EACH TRIP. I UNDERSTAND THAT PROVIDING FALSE INFORMATION MAY RESULT IN CRIMINAL CONSEQUENCES.

NOTE: THIS FORM MAY BE USED FOR TRANSACTIONS FOR NO MORE THAN 7 CONSECUTIVE DAYS.

893

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FISHERMAN COPY

5487004

CONTINUATION
TICKET NO.

VOID
TICKET

VESSEL
NAMECoast Guard Documented
Vessel Number

OR

State Vessel Registration
Number

C

Area Fished

Gear Used

Dealer's
License Number

C

YEAR

MONTH

ITEM	DEALER DEDUCTIONS	COST

TOTAL PAID

FISHERMAN'S SIGNATURE

DEALER'S SIGNATURE _____

NOTE: ALL INFORMATION REQUIRED BY LAW MUST BE COMPLETED FOR EACH TRIP. I UNDERSTAND THAT PROVIDING FALSE INFORMATION MAY RESULT IN CRIMINAL CONSEQUENCES.
NOTE: THIS FORM MAY BE USED FOR TRANSACTIONS FOR NO MORE THAN 7 CONSECUTIVE DAYS.

794

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TICKET NO.

4952008

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VOID
TICKET

COMMERCIAL FISHERMAN'S
NAME (Please Print)

Commercial
Fisherman's
License Number

C

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TRIP TIME

VESSEL
NAMECoast Guard Documented
Vessel Number[illegible]

OR

State Vessel Registration
Number

Area Fished

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Gear Used

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SEAFOOD DEALER'S NAME
(Please Print)Seafood Dealer's
License Number

C

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Transaction Date

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[illegible]

ITEM	DEALER DEDUCTIONS	COST

TOTAL PURCHASES

TOTAL DEDUCTIONS

TOTAL PAID

I CERTIFY THAT THIS INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

FISHERMAN'S SIGNATURE

DEALER'S SIGNATURE _____

NOTE: ALL INFORMATION REQUIRED BY LAW MUST BE COMPLETED FOR EACH TRIP.

I UNDERSTAND THAT PROVIDING FALSE INFORMATION MAY RESULT IN CRIMINAL CONSEQUENCES.

LOUISIANA DEPARTMENT OF WILDLIFE AND FISHERIES DEALER RECEIPT FORM (SHELLFISH TRIPS ONLY)

794

Please print characters like this and stay within the boxes. Use only blue or black ink.

1234567890 ABCDEFGHIJKLMNOPQRSTUVWXYZ

FISHERMAN COPY

TICKET NO. 4952008

CONTINUATION
TICKET NO.

VOID
TICKET

FISHERMAN PROVIDED INFORMATION

COMMERCIAL FISHERMAN'S
NAME (Please Print)

Commercial
Fisher's
License Number

C

TRIP TIME

VESSEL
NAME

Coast Guard Documented
Vessel Number

OR

State Vessel Registration
Number

Area Fished

Gear Used

WHOLESALE/RETAIL SEAFOOD DEALER PROVIDED INFORMATION

SEAFOOD DEALER'S NAME
(Please Print)

Seafood Dealer's
License Number

C

Transaction Date

SPECIES	SHELLFISH CODE	QUANTITY	UNIT	COND	COUNT OR MARKET	PRICE/UNIT	VALUE	VOID
							\$	
							\$	
							\$	
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ITEM	DEALER DEDUCTIONS	COST

TOTAL PURCHASES	
TOTAL DEDUCTIONS	
TOTAL PAID	

I CERTIFY THAT THIS INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

FISHERMAN'S SIGNATURE

NOTE: ALL INFORMATION REQUIRED BY LAW MUST BE COMPLETED FOR EACH TRIP
I UNDERSTAND THAT PROVIDING FALSE INFORMATION MAY RESULT IN CRIMINAL CONSEQUENCES.

DEALER'S SIGNATURE

794

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DEALER COPY

TICKET NO.

[4952008]

CONTINUATION
 TICKET NO.

**VOID
TICKET**

COMMERCIAL FISHERMAN'S
NAME (Please Print)

Commercial
Fisherman's
License Number

C

TRIP TIME

VESSEL
NAME

**Coast Guard Documented
Vessel Number**

OR

**State Vessel Registration
Number**

Area Fished

Gear Used

**Seafood Dealer's
License Number**

C

SEAFOOD DEALER'S NAME
(Please Print)

Transaction Date

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[illegible][illegible]**TOTAL PURCHASES****TOTAL DEDUCTIONS**

TOTAL PAID

I CERTIFY THAT THIS INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

FISHERMAN'S SIGNATURE

DEALER'S SIGNATURE

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LOUISIANA DEPARTMENT OF WILDLIFE AND FISHERIES DEALER RECEIPT FORM (OYSTER TRIPS ONLY)

Please print characters like this and stay within the boxes. Use only blue or black ink.

695

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DEPARTMENT COPY

TICKET NO. 1362821

CONTINUATION
TICKET NO.

VOID
TICKET

FISHERMAN PROVIDED INFORMATION

COMMERCIAL FISHERMAN'S
NAME (Please Print)

Commercial
Fisherman's
License Number

C

VESSEL
NAME

Coast Guard Documented
Vessel Number

OR
State Vessel Registration
Number

Area Fished

Gear Used

WHOLESALE/RETAIL SEAFOOD DEALER PROVIDED INFORMATION

Dealer's License
Number

C

DEALER'S NAME (Please Print)

YEAR

MONTH

DAY	TRIP TIME	PUBLIC	PRIVATE	QUANTITY	SACK	SHELL STOCK BUSHEL	BARREL	PRICE/UNIT	VALUE	FISHERMAN'S INITIALS	VOID
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Form 695
Reduced 10%

ITEM	DEALER DEDUCTIONS	COST

TOTAL PURCHASES

TOTAL DEDUCTIONS

TOTAL PAID

I CERTIFY THAT THIS INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

FISHERMAN'S SIGNATURE

DEALER'S SIGNATURE

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695

1234567890 ABCDEFGH IJKLMNOPQRSTUVWXYZ

DEALER COPY

TICKET NO.

1362821

CONTINUATION
TICKET NO.VOID
TICKET

FISHERMAN PROVIDED INFORMATION

COMMERCIAL FISHERMAN'S
NAME (Please Print)Commercial
Fisherman's
License Number

C

VESSEL
NAMECoast Guard Documented
Vessel Number

OR

State Vessel Registration
Number

Area Fished

Gear Used

WHOLESALE/RETAIL SEAFOOD DEALER PROVIDED INFORMATION

DEALER'S NAME (Please Print)

Dealer's License
Number

C

YEAR

MONTH

DAY	TRIP TIME	PUBLIC	PRIVATE	QUANTITY	SACK	SHELL STOCK BUSHEL	BARREL	PRICE/UNIT	VALUE	FISHERMAN'S INITIALS	VOID
1		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$		<input type="checkbox"/>
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LOUISIANA DEPARTMENT OF WILDLIFE AND FISHERIES DEALER RECEIPT FORM (OYSTER TRIPS ONLY)

Please print characters like this and stay within the boxes. Use only blue or black ink.

695

1234567890 ABCDEFGHIJKLMNOPQRSTUVWXYZ

FISHERMAN COPY

TICKET NO. 1362821

CONTINUATION
TICKET NO.VOID
TICKET

FISHERMAN PROVIDED INFORMATION

COMMERCIAL FISHERMAN'S
NAME (Please Print)Commercial
Fisher's
License Number

C

VESSEL
NAMECoast Guard Documented
Vessel Number

OR

State Vessel Registration
Number

Area Fished

Gear Used

WHOLESALE/RETAIL SEAFOOD DEALER PROVIDED INFORMATION

DEALER'S NAME (Please Print)

Dealer's License
Number

C

YEAR

MONTH

DAY	TRIP TIME	PUBLIC	PRIVATE	QUANTITY	SACK	SHELL STOCK BUSHEL	BARREL	PRICE/UNIT	VALUE	FISHERMAN'S INITIALS	VOID
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ITEM DEALER DEDUCTIONS COST

TOTAL PURCHASES

TOTAL DEDUCTIONS

TOTAL PAID

I CERTIFY THAT THIS INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

FISHERMAN'S SIGNATURE

DEALER'S SIGNATURE

NOTE: ALL INFORMATION REQUIRED BY LAW MUST BE COMPLETED FOR EACH TRIP. I UNDERSTAND
THAT PROVIDING FALSE INFORMATION MAY RESULT IN CRIMINAL CONSEQUENCES.
NOTE: THIS FORM MAY BE USED FOR TRANSACTIONS FOR NO MORE THAN 7 CONSECUTIVE DAYS.